

MAJOR MODIFICATION FORM FOR HOT MIX ASPHALT GENERAL PERMIT MSR70





INSTRUCTIONS

Coverage recipients shall notify the Mississippi Department of Environmental Quality of plans to expand the acreage or "footprint" of an existing hot mix asphalt facility, waive the siting criteria of an existing operation, or construct a new air emissions source. This form must be submitted when any of the following activities is/are being proposed (check all that apply). Copies of the signed Return-Receipts and Contiguous Landowner Notification Forms shall accompany this Major Modification Form in accordance with ACT4, S-7 of the General Permit. "Footprint" identified in the original HMANOI is proposed to be enlarged (a modified SWPPP and an updated USGS topographic map must be submitted). Applicant requests waiver of facility siting criteria prescribed in ACT5 of the General Permit. Applicant intends to construct new air emissions source(s) This form must be signed by the current coverage recipient under Mississippi's Hot Mix Asphalt General Permit. A different operator must have general permit coverage transferred prior to coverage being modified. Coverage recipients are authorized to implement the proposed modifications, under the conditions of the General Permit, only upon receipt of written notification of approval by the MDEQ.			
ALL INFORMATION MUST BE COMPLETED (indicate "N/A" where not applicable)			
COVERAGE RECIPIENT INFORMATION			
COVERAGE RECIPIENT CONTACT PERSON: John C. Harreld, Jr., President			
COMPANY NAME: AJ Const	ruction, Inc.		
STREET OR P.O. BOX: P.O. B	ox 2024		
_{CITY:} Madison		STATE: MS	_{ZIP:} 39130
PHONE # (INCLUDE AREA COD	E): (601) 667-3667		
PROJECT INFORMATION			
HOT MIX ASPHALT GENERAL PERMIT COVERAGE NUMBER: MSR70 0109			
ADDITIONAL ACREAGE TO BE DISTURBED: N/A		_ T	OTAL ACREAGE: ~10 acres
DESCRIBE PROPOSED SITING CRITERIA WAIVER: N/A			
LIST NEW AIR EMISSIONS SOURCES: Rock Crusher			
FACILITY NAME: AJ Construction, Inc Gallatin Plant			
_{CITY:} Jackson		COUNTY: Hind	ds
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. A			
Printed Name		7	Title
Please submit this form to: Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225			



Revised: 10/09/09